

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	MS	66621	8/18
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	BTH	CC245	10-2-0
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)... Canceled
 ÷ Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Final	Original	Date
1			
2	✓	✓	7/26/81
3			
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16		✓	
17		N	
18	✓	N	
19	✓	✓	%
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35			
36	✓	✓	✓
37	✓	✓	%
38	N	N	N
39	✓	✓	%
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46			
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48			
49	✓	✓	✓
50	✓	✓	%

Claim	Final	Original	Date
51	✓	✓	7/25/81
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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